Filing Date **CLAIMS ONLY** Applicant(s) May be used for additional claims or amendments AFTER FIRST AMENDMENT AFTER SECOND AMENDMENT AS FILED CLAIMS Indep Depend Indep Depend Depend Indep Indep Depend Indep Depend Indep 51 52 53 54 55 56 57 58 59 60 61 62 63 .64 -65 -66 67 68 69 70 71 72 73 74 75 76 17 18 19 20 21 22 23 24 25 26 27 28 78 79 29 80 30 31 32 33 34 35 36 37 38 82 83 84 85 83 87 88 -89 -- 90 .. 40 -41 92 93 94 -42-43 44 95 45 46 96 . 97. 47 48 98 99 49. 100 50 Total Total Indep Indep Depend Depend Total Claims Total Claims